

BEST AVAILABLE COPY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Date 9 / 2 / 04
Mo. Day Yr.

Atty. Docket 10684.03210

Application No. 09/826,171

Sir:

Kindly acknowledge receipt of the accompanying:

- ☐ Response to Official Action. _____
- ☐ Check for \$ _____ (claims fee)
- ☐ Petition under 37 CFR 1.136 and Check for \$ _____
- ☐ Notice of Appeal and Check for \$ _____
- ☐ Information Disclosure Statement, PTO-1449 and _____ documents
- ☐ Claim for priority and certified copies of _____ priority applications
- ☐ Issue fee transmittal and Check for \$ _____
- ☒ Other (specify) Amendment After Allowance

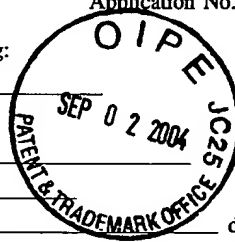
by placing your receiving date stamp hereon and returning to deliverer.

Atty. Curtley

Due Date N, D, D

Mo. Day Yr.

FOHS-D-00



00684.003210

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: S. Lee
HIDEKI MATSUMOTO, ET AL.)	
	:	Group Art Unit: 2852
Application No.: 09/826,171)	
	:	
Filed: April 5, 2001)	Notice of Allowance: August 16, 2004
	:	Confirmation No. 7813
For: A DEVELOPING DEVICE, A PROCESS)	
CARTRIDGE, AND AN ELECTROPHOTO-	:	
GRAPHIC IMAGE FORMING APPARATUS)	
FOR DETECTING AN AMOUNT OF	:	
DEVELOPER)	September 2, 2004

Mail Stop Issue Fee

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Allowance in the above-identified application.

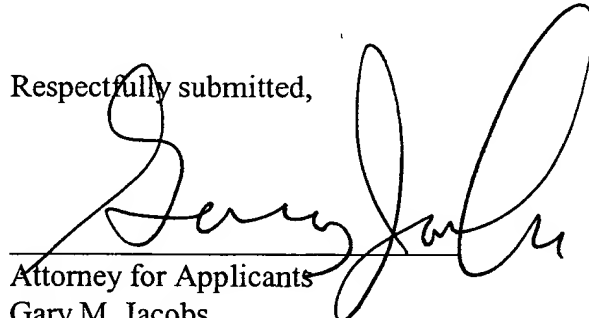
☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	84	MINUS	167	= 0	x \$9 \$18	0
INDEP. CLAIMS	12	MINUS	20	= 0	x \$42 \$86	0
Fee for Multiple Dependent claims \$145°/\$290						0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

- ☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$____ is enclosed.
- ☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$____ to cover the fee for a____month extension is enclosed.
- ☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' attorney, Gary M. Jacobs, may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Gary M. Jacobs
Registration No. 28,861

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-380
Facsimile: (212) 218-2200
GMJ/JSC/dc

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Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER ALLOWANCE

Sir:

Prior to payment of the Issue Fee, please amend the above-identified application as follows: